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FORM**

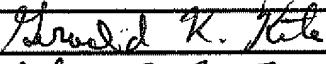
(to be used for all correspondence after initial filing)

		Application Number	10/731,767
		Filing Date	December 9, 2003
		First Named Inventor	Porter, John
		Art Unit	1771
		Examiner Name	Ruddock, Ula Corinna
Total Number of Pages in This Submission		Attorney Docket Number	D1815-00214

ENCLOSURES (Check all that apply)

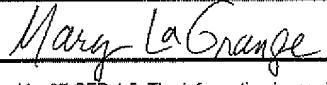
<input type="checkbox"/> Fee(s) Transmittal Form <ul style="list-style-type: none"> <input type="checkbox"/> Fee Attached 	<input type="checkbox"/> Drawing(s) <ul style="list-style-type: none"> <input type="checkbox"/> Licensing-related Papers 	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <ul style="list-style-type: none"> <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
<input checked="" type="checkbox"/> Amendment/Reply <ul style="list-style-type: none"> <input type="checkbox"/> After Allowance <input type="checkbox"/> Affidavits/declaration(s) 	<input type="checkbox"/> Petition <ul style="list-style-type: none"> <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address 	<input type="checkbox"/> Terminal Disclaimer <ul style="list-style-type: none"> <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Remarks	
<input type="checkbox"/> Express Abandonment Request	The Commissioner is hereby authorized to charge any fees associated with this communication or credit any overpayment to Deposit Account No.	
<input type="checkbox"/> Information Disclosure Statement	04-1679.	
<input type="checkbox"/> Certified Copy of Priority Document(s)		
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Gerald K. Kita, Reg. No. 24,125 Duane Morris LLP, Customer Number 08933
Signature	
Date	July 18, 2007

CERTIFICATE UNDER 37 CFR 1.10

I hereby certify that this correspondence and the documents referred to therein are being electronically filed in the United States Patent and Trademark Office on the date indicated below

Typed or printed name	Mary La Grange		
Signature		Date	7-18-07

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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